

RICK SNYDER GOVERNOR MICHAEL P. FLANAGAN STATE SUPERINTENDENT

March 25, 2014

MEMORANDUM

TO: State Board of Education

FROM: Michael P. Flanagan, Chairman

Subject: Approval of Special Education Advisory Committee Nominations

The Special Education Advisory Committee (SEAC) advises the State Board of Education on matters concerning the education of children with disabilities. The Individuals with Disabilities Education Act requires that this advisory committee include a 51% representation of persons with, or parents of children with, disabilities (ages birth through 26). The Michigan Department of Education will have reached compliance pending approval of the nominations as contained herein.

Attachment A lists the organizations currently represented on the SEAC. Attachment B Lists the names of eleven persons nominated by their organizations as delegates to fill organizational membership vacancies, seven persons nominated as Alternates, and four At-Large members to fill current vacancies.

Resumes of those persons to be appointed as Delegates, Alternates and At-Large members to the SEAC are found in Attachment C.

It is recommended that the State Board of Education approve eleven organizational delegates, seven organizational alternates and four at-large nominations for the terms specified in Attachment B of the Superintendent's memorandum dated March 25, 2014.

STATE BOARD OF EDUCATION

ORGANIZATIONS REPRESENTED ON THE SPECIAL EDUCATION ADVISORY COMMITTEE

<u>Orga</u>	anization	<u>Acronym</u>
1.	American Federation of Teachers Michigan	AFTMi
2.	Association for Children's Mental Health	ACMH
3.	Autism Society of Michigan	ASM
4.	Council for Exceptional Children	CEC
5.	Learning Disability Association of Michigan	LDAM
6.	Michigan Alliance for Families	MAF
7.	Michigan Association for Children with Emotional Disorders	MACED
8.	Michigan Association for Supervision and Curriculum Development	MASCD
9.	Michigan Association of Administrators of Special Education	MAASE
10.	Michigan Association of Intermediate School Administrators	MAISA
11.	Michigan Association of Intermediate Special Ed. Administrators	MAISEA
12.	Michigan Association of Local Special Education Administrators	MALSEA
13.	Michigan Association of Teachers of Children with Emotional	MATEDC
	Impairments	
14.	Michigan Association of Nonpublic Schools	MANS
15.	Michigan Association of Public School Academies	MAPSA
16.	Michigan Association of School Administrators	MASA
17.	Michigan Association of School Boards	MASB
18.	Michigan Association of School Social Workers	MASSW
19.	Michigan Association of School Psychologists	MASP
20.	Michigan Association of Secondary School Principals	MASSP
21.	Michigan Education Association	MEA
22.	Michigan Speech-Language-Hearing Association	MSLHA
23.	Michigan Transition Services Association	MTSA
24.	Michigan Elementary and Middle School Principals Association	MEMSPA

In addition to the organizational seats, eight At-Large members are appointed by the State Board of Education. Presently, there are four At-Large vacancies to be filled.

SPECIAL EDUCATION ADVISORY COMMITTEE

Individual Nominations and their Respective Terms of Service

Organizational Delegate Nominations		
Name	Representing	Length of Term
Michelle DeJulian*	Michigan Association of School Social Workers	July 1, 2014 – June 30, 2017
Latika Fenderson	American Federation of Teachers Michigan	July 1, 2014 – June 30, 2017
Maggie Kolk*	The Arc Michigan	July 1, 2014 – June 30, 2017
Wendy Minor*	Michigan Council for Exceptional Children	July 1, 2014 - June 30, 2017
Caryn Pack-Ivey*	Michigan Alliance for Families	July 1, 2014 – June 30, 2017
Angela Pakledinaz*	Michigan Education Association	July 1, 2014 – June 30, 2017
Kathy Peasley	Michigan Association for Supervision and Curriculum Development	July 1, 2014 – June 30, 2017
Jane Shank ¹	Association for Children's Mental Health	July 1, 2014 – June 30, 2016
Jennifer Trackwell*	Michigan Transition Services Association	July 1, 2014 – June 30, 2017
Mary Vratanina	Michigan Association of Intermediate School Administrators	July 1, 2014 – June 30, 2017
Vicki White*	Learning Disabilities Association of Michigan	July 1, 2014 – June 30, 2017

¹Served one previous year on the SEAC *Person with or parent of a child (birth through 26) with a disability

Organizational Alternate Nominations		
Name	Representing	Length of Term
Regina Carey^	Learning Disabilities Association of Michigan	July 1, 2014 – June 30, 2017
Michelle A. Driscoll*^	The Arc Michigan	July 1, 2014 – June 30, 2017
Chandra Jones*^	Michigan Alliance for Families	July 1, 2014 – June 30, 2017
Lois Lofton-Doniver^	American Federation of Teachers Michigan	July 1, 2014 – June 30, 2017
John Pakledinaz*^	Michigan Education Association	July 1, 2014 – June 30, 2017
Marsha Wharton ^	Michigan Elementary and Middle School Principals Association	July 1, 2014 – June 30, 2017
William Young*^	Michigan Association of Teachers of Children with Emotional Impairments	July 1, 2014 – June 30, 2017

^{*}Person with or parent of a child (birth through 26) with a disability ^Alternate

At-Large Nominations		
Name	Length of Term	
Lisa Eldred*	July 1, 2014 – June 30, 2017	
Karen Kleinheksel*	July 1, 2014 – June 30, 2016	
Nicole Miller*	July 1, 2014 – June 30, 2017	
John Patterson*	July 1, 2014 – June 30, 2017	

 $^{^{*}}$ Person with or parent of a child (birth through 26) with a disability

Name: Michelle DeJulian		
Business Address: Trenton Public Schools 2601 Charlton Road Trenton, Michigan 48183	Summer Address: 7761 Ferry Road Grosse Ile, Michigan 48138	
Business Telephone: 734.676.2177, ext 311	Cell Phone: 734-620-3242	
Business E-mail: dejulian@trentonschools.com Present Position: School Social Worker	Home E-mail: mdjbam@hotmail.com	
Category Organization: Michigan Association	n of School Social Workers	
Race:*		
SEAC alternate 2011-2014	1	
Educational and Other Organizational Affiliations: MASSW Region A President 2012–present MASSW Executive Board Member 2009-present		
Education: B.A., Hillsdale College MSW, University of Michigan		
Miscellaneous Information: CSMT Coordinator/Chair-Grant Holder 2013-present		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No		

Name: Latika Fenderson		
Business Address:	Summer Address:	
12225 Masonic	19126 Ash	
Warren, Michigan 48093	Eastpoint, Michigan 48021	
Business Telephone: 586-939-2290	Cell Phone: 313-408-4497	
Business E-mail: Ifenderson@misk.net	Home E-mail: LatikaFenderson@yahoo.com	
Present Position: Special Education Teacher, Mac		
Category Organization: American Federal of	Teachers Michigan	
Race:*	Gender: ☐ Male	
Prior Experience: SEAC Alternate 2011-2014		
Educational and Other Organizational Affiliations:		
Education: Master Degree in Education		
Miscellaneous Information:		
Federal legislation mandates that the SEAC members of a child with a disability years of age and receiving special education service ensure compliance relative to the 51% membersh definition. Yes	y." If a parent, the child needs to be under 26 ces for the duration of the appointment. To	

Name: Maggie Kolk			
Business Address:	Summer Address:		
The ARC Kent 2922 Fuher Avenue, N.E.	5646 W. 22 nd Street Fremont, Michigan 49412		
Grand Rapids, Michigan 49505			
Business Telephone: 616-459-3339	Cell Phone: 616-780-5783		
Business E-mail: Maggie@arckent.org	Home E-mail: maggie59@gmail.com		
Present Position: Advocate			
Category 🛛 Organization: The Arc Michigan			
Race:*			
(*requested in order to obtain diverse representation)			
Prior Experience: Prior SEAC member and alternate, Advocate for 20 years in the disability community			
Educational and Other Organizational Affiliations: President, Arc Newaygo County; Member, Fraternal Order of Police Lodge 135; Member Arc Michigan and U.S.			
Education: B.S. in Political Science			
Miscellaneous Information: Parent of 25 year old daughter with a disability			
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No			

Name: Wendy Minor		
Business Address:	Summer Address:	
Van Buren ISD	45862 Winchester Circle	
490 s. Paw Paw St.	Mattawan, Michigan 49071	
Lawrence, Michigan 49064	-	
Business Telephone: 269.539.5112	Cell Phone: 269-308-1155	
Business E-mail: wminor@vbisd.org	Home E-mail:	
Present Position: Planner/Monitor for Special Edu		
Category Organization: Michigan Council for	Exceptional Children	
Race:* Caucasian	Gender: Male Female	
Native American		
African-American		
Hispanic		
Asian		
Other (*requested in order to obtain diverse represental	rian)	
Prior Experience: Past President of Michigan Cou		
	Current MCEC executive board member;	
member of MAASE	current rices executive board member,	
Educational and Other Organizational Affiliations:		
Educational and other organizational / minutions:		
Education: B.S. Elementary and Special Education	n, WMU; ZA Early Childhood Endorsement,	
WMU; M.A. Special Education, GVSU.		
Miscellaneous Information:		
Parent of a high school student with a learning disability and another son who received speech		
therapy for 5 years.		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of		
"persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To		
ensure compliance relative to the 51% membersh definition.	ip, we ask you to identify if you frieet that	
∀ Yes	□ No	
ZA IC3		

Name: Caryn Pack Ivey		
Business Address:	Summer Address:	
Goodwill Industries of Greater Detroit 3111 Grand River Detroit, Michigan 48208		
Business Telephone: 313-557-8779	Cell Phone: 313-920-9592	
Business E-mail: caryn@michiganallianceforfamilies.org	Home E-mail: capiv@comcast.net	
Present Position: Region 1 Director	- capit groundatinet	
Category Organization: Michigan Alliance for	Families	
Race:* Caucasian Native American African-American Hispanic Asian Other (*requested in order to obtain diverse representate)	Gender: ☐ Male	
Prior Experience: Previous SEAC member, Board Member for MDDC, Arc of Northwest Wayne		
County; and United Cerebral Palsy of Detroit		
Educational and Other Organizational Affiliations: Advisory Group member to Michigan Rehab Council; Partners in Policymaking graduate		
Education: B.A., Music and Business, Marygrove College		
Miscellaneous Information: Parent of 17 year old with a disability		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No		

Name: Angela Pakledinaz			
Business Address:	Summer Address:		
268 E. Ohio	1143 Clubhouse Drive		
Farwell, Michigan 48622	Farwell, Michigan 48622		
, , , , , , , , , , , , , , , , , , ,	, , , , ,		
Business Telephone: 989-588-9916	Cell Phone: 989-429-8359		
Business E-mail:	Home E-mail:		
apakledinaz@farwellschools.net	apakledinaz@hotmail.com		
Present Position:			
Kindergarten teacher			
Category Organization: Michigan Education	Association		
Race:* 🛛 Caucasian	Gender: 🗌 Male 🔀 Female		
☐ Native American			
☐ African-American			
☐ Hispanic			
☐ Asian			
☐ Other			
(*requested in order to obtain diverse representation)			
Prior Experience: Elementary teacher			
Educational and Other Organizational Affiliations: Michigan Education Association			
Education: Bachelor of Science in Education, Rea	ding Recovery Teacher		
Miscellaneous Information:			
Federal legislation mandates that the SEAC memb	pership be comprised of at least 51% of		
"persons with or parents of a child with a disability." If a parent, the child needs to be under 26			
years of age and receiving special education services for the duration of the appointment. To			
ensure compliance relative to the 51% membership, we ask you to identify if you meet that			
definition.			
	□ No		
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Name: Kathy Peasley		
Business Address:	Summer Address:	
220 Lamson Road	220 Lamson Road	
Grand Ledge, MI 48837	Grand Ledge, MI 48837	
Business Telephone: 517-925-5403	Cell Phone: 989-954-3141 (please do not	
	publish)	
	publishy	
Business E-mail: peasleyk@glcomets.net	Home E-mail: peasleyk@glcomets.net	
Described Destricts Assistant Constitution for As	and a series Constitution Builties Colored	
Present Position: Assistant Superintendent for Ac	· -	
Category Organization: Michigan Association	for Supervision and Curriculum Development	
Race:* 🛛 Caucasian	Gender:	
Native American		
☐ African-American		
Hispanic		
Asian		
☐ Other		
(*requested in order to obtain diverse representate	tion)	
Prior Experience:	-	
Interim Superintendent – Grand Ledge Public Schools		
Director of General Education – Ionia County ISD		
Director of General Education – Clare-Gladwin RESD		
Adjunct Faculty – Central Michigan University		
Adjunct Faculty – Michigan State University	Contan Control Michigan University	
Director of the Science/Mathematics/Technology (
Program Evaluation Consultant – Science and Math Program Improvement Office, WMU		
Assessment Consultant – Midland Public Schools		
Educational and Other Organizational Affiliations:		
Michigan Association for Supervision and Curriculu		
Michigan Association of School Administrators (MA	ASA)	
Education:		
B.S. Ferris State College - Biology and Chemistry		
M.S. Central Michigan University – Biology Education		
Ph.D. Michigan State University – Curriculum, Teaching and Educational Policy		
Miscellaneous Information:	<u> </u>	
Federal legislation mandates that the SEAC memb	pership he comprised of at least 51% of	
"persons with or parents of a child with a disability." If a parent, the child needs to be under 26		
years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that		
	ip, we ask you to identify if you meet that	
definition.		
☐ Yes	⊠ No	

Name: Jane Shank		
Business Address:	Summer Address:	
223 Dubonnet Trail Interlochen, Michigan 49643		
Business Telephone: 231-943-0368	Cell Phone: 231-632-6650	
Business E-mail: acmhjane@sbcglobal.net	Home E-mail: janeandpooh1218@yahoo	
Present Position: Executive Director		
Category Organization: Assocation for Children	en's Mental Health	
Race:*	Gender: ☐ Male ☐ Female	
Prior Experience: Interim Executive Director, Association for Children's Mental Health. Worked in maximum security prison, providing mental health care to males between the ages of 14 and 20 who had been adjudicated as adults. Field practicum for MSW was in the office of a school social worker.		
Educational and Other Organizational Affiliations: NASW; Chair of PAIMI Council for Michigan Protection and Advocacy Services; MP&A board member; Member of the Federation of Families for Children's Mental Health		
Education: B.S. in Medical Technology, Michigan State University; MSW, Grand Valley State University		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No		
	<u> </u>	

Name: Jennifer Trackwell		
Business Address:	Summer Address:	
1425 West Grand River Howell, Michigan 48843 Business Telephone: 517-540-6839	3770 Audrey Rae Lane Howell, Michigan 48843 Cell Phone: 517-202-0748	
Busiliess Telephone. 317-340-0639	Cell Phone. 517-202-0746	
Business E-mail: jennifertrackwell@livingstonesa.org	Home E-mail: trackwelj@yahoo.com	
Present Position: Adult Transition Coordinator and Special Educat	tion Provider for W-A-Y for Livingston ESA	
Category Organization: Michigan Transition	Services Association	
Race:*	Gender: ☐ Male ☒ Female	
Prior Experience: Self- contained EI Teacher for Livingston ESA		
Educational and Other Organizational Affiliations: Treasurer, Michigan Transition Services Association; Board Member, Livingston County Business and Education Alliance		
Education: Currently enrolled in the graduate program at Michigan State University pursuing Special Education MA degree		
Miscellaneous Information: Nominated as a candidate for the 2012-2013 Michigan Teacher of the Year		
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⊠ Yes	□ No	

Name: Mary Vratanina		
Business Address: Cheboygan-Otsego-Presque Isle ESD 6065 Learning Lane Indian River, Michigan 49749	Summer Address:	
Business Telephone: 231-238-9394, ext. 200	Cell Phone:	
Business E-mail: mvrat@copesd.org	Home E-mail:	
Present Position: Superintendent		
Category Organization: Michigan Association	of Intermediate School Administrators	
Race:*	Gender:	
(*requested in order to obtain diverse representat	cion)	
Prior Experience: Special Education background		
Educational and Other Organizational Affiliations: Michigan Association of Intermediate School Administrators, Michigan Association of School Administrators		
Education: Bachelor and Master Degrees		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
☐ Yes	No No	

Name: Vicki White		
Business Address:	Summer Address:	
	320 Creston Avenue Lansing, Michigan 48906	
Business Telephone:	Cell Phone:	
Business E-mail:	Home E-mail: Vicki.marie.white@gmail.com	
Present Position:		
Category Organization: Learning Disabilities	Association of Michigan	
Race:*	Gender: ☐ Male ☐ Female	
Prior Experience: Currently serves as the Alternate for the Learning Disabilities Association of Michigan		
Educational and Other Organizational Affiliations:		
Education:		
Miscellaneous Information: Parent of two children under the age of 26 with Individualized Education Programs		
Federal legislation mandates that the SEAC members of a child with a disability years of age and receiving special education service ensure compliance relative to the 51% membersh definition. Yes	y." If a parent, the child needs to be under 26 ces for the duration of the appointment. To	

Name: Regina Carey		
Business Address:	Summer Address:	
Learning Disabilities Association of Michigan	3816 Sandlewood Drive	
Suite 101 200 Museum Drive	Okemos, Michigan 48864	
Lansing, Michigan 48933		
3, 3		
Business Telephone:	Phone: 517-927-7115	
Business E-mail:	Home E-mail: coachmecarey@gmail.com	
Present Position: served as SEAC delegate for page	st three years	
Category Organization: Learning Disabilities	Association of Michigan	
Race:* Caucasian	Gender: 🗌 Male 🔀 Female	
☐ Native American☐ African-American		
☐ Hispanic		
Asian		
Other		
(*requested in order to obtain diverse representation	tion)	
Prior Experience:		
Educational and Other Organizational Affiliations:		
Education:		
Miscellaneous Information:		
Federal legislation mandates that the SEAC memb		
"persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To		
ensure compliance relative to the 51% membersh		
definition.	., , , , ,	
☐ Yes	⊠ No	

Name: Michelle A. Driscoll		
Business Address:	Summer Address:	
The Arc of Northwest Wayne County 26049 Five Mile Road Redford, Michigan 48239	1164 Knightsbridge Road Canton, Michigan 48187	
Business Telephone: 313-532-7915	Phone: 734-718-7029	
Business E-mail: mdriscoll@thearcnw.org	Home E-mail:	
Present Position: Advocacy and Community Reso	ource Director	
Category Organization: The Arc Michigan		
Race:*		
Prior Experience: SEAC Alternate		
Educational and Other Organizational Affiliations: Member, Michigan Transition Services Association; Member, Arc Northwest Wayne County, Arc Michigan and Arc of the United States		
Education: B.S. Psychology, B.S. Law Enforcement Administration		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No		

Name: Chandra Jones		
Business Address:	Summer Address:	
	3931 Sashabaw Road Waterford, Michigan 48329	
Business Telephone:	Home Phone: 248-618-8818	
Business E-mail:	Home E-mail: scjones415@yahoo.com	
Present Position:		
Category Organization: Michigan Alliance for	Families	
Race:* Caucasian Native American African-American Hispanic Asian Other	Gender: ☐ Male	
(*requested in order to obtain diverse representation) Prior Experience:		
Alternate for the Michigan Interagency Coordinating Council (Part C); Served as At-Large member of the SEAC for three years.		
Educational and Other Organizational Affiliations:		
Education: B.A., Family Life Education, Spring Arbor University; AAS, Mental Health/Social Work, Oakland Community College; AAS/Early Childhood Development, Oakland Community College; AAS, General Studies, Oakland Community College		
Miscellaneous Information: Son, 10 years old currently in Special Education		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
⊠ Yes	□ No	

Name: Lois Lofton-Doniver		
Business Address:	Summer Address:	
2661 E. Jefferson Detroit, Michigan 48207	16545 Shaftsbury Detroit, Michigan 48219	
Business Telephone: 313-393-2200	Phone: 313-330-4762	
Business E-mail:	Home E-mail: Idoniver@yahoo.com	
Present Position: Chair, Statewide AFT Michigan Professional Development, AFT Michigan	Special Education Committee; Director for	
Category Organization: American Federal of Teachers Michigan		
Race:* Caucasian Gender: Male Female Native American African-American Hispanic Asian Other (*requested in order to obtain diverse representation)		
Prior Experience: SEAC Delegate 2011-2014; Retired Special Education Teacher; Active PTA Council member for Special Education, metro area		
Educational and Other Organizational Affiliations: Michigan PTA; Michigan Department of Education BAA Advisory Committee; AFT SCCS for Special Education		
Education: Bachelor in Special Education; Master Degree in Education Sociology		
Miscellaneous Information: Mental Health First Aid Provider		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
☐ Yes	⊠ No	

Name: John Pakledinaz		
Business Address: 399 E. Michigan Street	Summer Address: 1143 Clubhouse Drive	
	Farwell, Michigan 48622	
Farwell, Michigan 48622	rai weii, Michigani 40022	
Business Telephone: 989-429-8208	Phone: same	
Business E-mail:	Home E-mail:	
jpakedinaz@farwellschools.net	jpakledinaz@gmail.com	
Present Position: Teacher		
Category Organization: Michigan Education	Association	
Other:		
☐ Board Member's Nominee		
(indicate name of Board Member):		
Race:* Caucasian	Gender: $oxedsymbol{oxtime}$ Male $oxedsymbol{\Box}$ Female	
☐ Native American		
☐ African-American		
☐ Hispanic		
Asian		
U Other	tion)	
(*requested in order to obtain diverse representate Prior Experience: High School Teacher	LIOII)	
Prior Experience. High School reacher		
Educational and Other Organizational Affiliations:		
Michigan Education Association		
Education		
Education:		
Bachelor Science, Central Michigan University		
Miscellaneous Information:		
Thochaneous Information.		
Federal legislation mandates that the SEAC memb	pership be comprised of at least 51% of	
"persons with or parents of a child with a disability	·	
years of age and receiving special education servi		
ensure compliance relative to the 51% membersh	·	
definition.		
⊠ Yes	☐ No	

Name: Marsha Wharton		
Business Address:	Summer Address:	
1445 W. Auburn Road	316 Hampton Woods	
Rochester Hills, MI 48309	Lake Orion, MI 48360	
Business Telephone: 248-537-6398	Cell Phone: 248-941-1364	
Business E-mail: marsha.wharton@avondale.k12.mi.us	Home E-mail:whartonm01@comcast.net	
Present Position: Student Achievement Specialist		
Category 🛛 Organization: Michigan Elementary	and Middle School Principals Association	
Race:*		
Prior Experience:		
Elementary and Middle School Administrator – 14 years Elementary Teacher, Reading Specialist – 15 years		
Educational and Other Organizational Affiliations: MEMSPA, ASCD		
Education: Current Doctoral Student in Educational Leadership at Michigan State University Certificate in Ed Leadership – Oakland University Masters' in Early Childhood – Wayne State University Bachelor of Science in Elementary Education – Wayne State University		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
Yes	⊠ No	

Name: William L. Young		
Business Address: Ingham Intermediate School District 2630 West Howell Road Mason Mi. 48854	Summer Address:	
Business Telephone: 517-244-1350	Cell Phone: 517-348-3254	
Business E-mail: wyoung@inghamisd.org	Home E-mail: billjeany@sbcglobal.net	
Present Position: Behavior Management Consult		
Category Organization: Michigan Association Impairments	of Teachers of Children with Emotional	
Race:*	Gender: 🛛 Male 🗌 Female	
Prior Experience: I have served on the MATCEI board for the past two years. I have presented at national conferences on Bullying and Relationship Building.		
Educational and Other Organizational Affiliations: MATCEI Board of Directors.		
Education: MA, in Family Life Education. Certifications to train in; Parent Talk, Values Clarification, Problem Solving and Listening Skills. Transactional Analysis and Positive Peer Culture.		
Miscellaneous Information: I have worked with at risk and handicap students for most of my career. I have worked in the Juvenile Justice System with hard core Juveniles. Currently I am working with Severely Emotionally Impaired high school students from twelve different school districts. My wife and I have full guardianship of our Grand Daughter since she was two months. She is ADHD and is being treated for Juvenile Empathic arthritis. I also have a birth defect that affects my ability to walk.		
Federal legislation mandates that the SEAC members of a child with a disability years of age and receiving special education servicensure compliance relative to the 51% membersh definition. Yes	y." If a parent, the child needs to be under 26 ces for the duration of the appointment. To	
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Name: Lisa Eldred		
Business Address:	Summer Address:	
540 Washington Street Otsego, MI 49078	6571 Ravine Rd. Kalamazoo, MI 49009	
Business Telephone: (269)692-6199	Cell Phone: (269)760-2641	
Business E-mail: leldred@otsegops.org	Home E-mail: leldred@yahoo.com	
Present Position: Teacher		
Category 🛛 At-Large		
Race:*	Gender: ☐ Male ☒ Female tion)	
Prior Experience:		
PAC Chairperson for AAESA PAC		
Educational and Other Organizational Affiliations:		
Education:		
Bachelor of Science from Western Michigan University		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition. Yes No		

Name: Karen Kleinheksel		
Business Address:	Home Address: 11515 Boulder Drive, East Apt. 266 Lowell, Michigan 49331	
Business Telephone:	Cell Phone: 616-340-7385	
Business E-mail:	Home E-mail: Madison.2003@hotmail.com	
Present Position: member of Parent Advisors of S	Special Education, Kent ISD	
Category 🛛 At-Large		
Race:*		
Prior Experience: elementary and special education teacher, certified guidance counselor		
Educational and Other Organizational Affiliations:		
Education: graduate of Hope College and Grand Valley State University		
Miscellaneous Information: daughter receives special education services		
Federal legislation mandates that the SEAC members of a child with a disability years of age and receiving special education servious ensure compliance relative to the 51% membersh definition.	y." If a parent, the child needs to be under 26 ces for the duration of the appointment. To	
⊠ Yes	☐ No	

Name: Nicole Miller		
Business Address:	Home Address: 8166 Palomino Dr. Buckley, MI 49620	
Business Telephone:231-715-1503	Cell Phone:231-649-3967 Home Phone:231-263-1040	
Business Email: nicole@michiganallianceforfamilies.org	Home E-mail: nicole102572@hotmail.com	
Present Position: Chair of PAC for TBAISD, Regional Parent Mentor for Northwest MI, Michigan Alliance for Families		
Category 🛛 At-Large		
Race:*		
Prior Experience: I have served as the Chair for TBAISD PAC for two years and as a member for		
six. I have served as a board member for Northern Lakes CMH for two years. I am an active member of the Grand Traverse RICC and various community groups.		
Educational and Other Organizational Affiliations:		
Education: I have a BS from Oakland University and a MA from Wayne State University, both in biological science. I worked for Henry Ford Hospital and Wayne State University as a medical researcher and have professional certification related to that work.		
Miscellaneous Information: I have a 9 year old son with autism.		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
⊠Yes	☐ No	

Name: John Patterson		
Business Address:	Summer Address:	
Lawton Middle Schools	John Patterson	
100 Blue Pride Drive	2825 S. Rose	
Lawton, Michigan 49065	Kalamazoo, Michigan 49001	
Business Telephone: 269-624-7600	Cell Phone: 269-267-8916	
Business E-mail: jpatterson@lawtoncs.org	Home E-mail: jpatterson@lawtoncs.org	
Present Position: Special Education Teacher 7 th /8 th , Interventionist		
Category 🛛 At-Large		
Race:*	Gender: 🛛 Male 🗌 Female	
Prior Experience: I have taught special education for the last three years. In that time I have		
worked with students who have a variety of disabilities, ranging from mild to severe. I am also the father of a seven-year-old son who has multiple disabilities (Noonan's syndrome, visual		
impairment, leukemia). I have been a mentor for a child with Tourette's syndrome and worked as a tutor, both private; and with a Kalamazoo based occupational therapist's office.		
Educational and Other Organizational Affiliations: None		
Education: BA of Arts, Communication studies/social work, Western Michigan University (2002), BA of Science, Special Education, Western Michigan University (2011)		
Miscellaneous Information:		
Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.		
⊠ Yes	☐ No	